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| 1 | NAME OF REPORTING PERSON Berkshire Hathaway Inc. | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 22,236,109 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 22,236,109 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 22,236,109 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 9.98% | |
| 12 | TYPE OF REPORTING PERSON HC, CO | |

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| 1 | NAME OF REPORTING PERSON National Indemnity Company | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Nebraska | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 17,778,249 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 17,778,249 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 17,778,249 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 7.98% | |
| 12 | TYPE OF REPORTING PERSON IC, CO | |

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| 1 | NAME OF REPORTING PERSON GEICO Corporation | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Delaware | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 17,567,720 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 17,567,720 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 17,567,720 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 7.89% | |
| 12 | TYPE OF REPORTING PERSON HC, CO | |

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| 1 | NAME OF REPORTING PERSON Government Employees Insurance Company | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 14,178,070 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 14,178,070 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 14,178,070 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 6.36% | |
| 12 | TYPE OF REPORTING PERSON IC, CO | |

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| 1 | NAME OF REPORTING PERSON GEICO Indemnity Company | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 3,389,650 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 3,389,650 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 3,389,650 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 1.52% | |
| 12 | TYPE OF REPORTING PERSON IC, CO | |

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| 1 | NAME OF REPORTING PERSON FlightSafety International Inc. Retirement Income Plan | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of New York | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 400,000 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 400,000 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 400,000 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.180% | |
| 12 | TYPE OF REPORTING PERSON EP | |

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| AME | NAME OF REPORTING PERSON | |
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| 1 | NAME OF REPORTING PERSON GEICO Corporation Pension Plan Trust | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Maryland | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 975,000 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 975,000 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 975,000 | |
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| 1 | NAME OF REPORTING PERSON BNSF Master Retirement Trust | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Texas | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 160,000 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 160,000 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 160,000 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not Applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.07% | |
| 12 | TYPE OF REPORTING PERSON EP | |

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| 1 | NAME OF REPORTING PERSON Benjamin Moore & Co Revised Retirement Income Plan |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> |
| 3 | SEC USE ONLY |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of New Jersey |
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| 1 | NAME OF REPORTING PERSON Buffalo News Office Pension Plan |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> |
| 3 | SEC USE ONLY |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of New York |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 SOLE VOTING POWER NONE |
| | 6 SHARED VOTING POWER 65,000 |
| | 7 SOLE DISPOSH 0 |
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| 1 | NAME OF REPORTING PERSON Dexter Pension Plan | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Connecticut | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 40,000 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 40,000 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 40,000 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not Applicable. | |
| 11 | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 0.02% | |
| 12 | TYPE OF REPORTING PERSON EP | |

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| 1 | NAME OF REPORTING PERSON Justin Brands Inc. Pension Plan | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | |
| 3 | SEC USE ONLY | |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION State of Texas | |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 | SOLE VOTING POWER NONE |
| | 6 | SHARED VOTING POWER 50,000 |
| | 7 | SOLE DISPOSITIVE POWER NONE |
| | 8 | SHARED DISPOSITIVE POWER 50,000 |
| 9 | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON 50,000 | |
| 10 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES <input type="checkbox"/> Not ApplibMN | |
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| 1 | NAME OF REPORTING PERSON Lubrizol Corp. Master Trust Pension | | | | | | | | |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> | | | | | | | | |
| 3 b | SEC USE ONLY | | | | | | | | |
| F E S | CITIZENSHIP OR PLACE OF ORGANIZATION State of | | | | | | | | |
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| 1 | NAME OF REPORTING PERSON R. Ted Weschler |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (a) <input checked="" type="checkbox"/> (b) <input type="checkbox"/> |
| 3 | SEC USE ONLY |
| 4 | CITIZENSHIP OR PLACE OF ORGANIZATION United States Citizen |
| NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH | 5 SOLE VOTING POWER 571,668 |
| | 6 SHARED VOTING POWER 0 |
| | 7 SOLE DISPOSITIVE POWER 571,668 |
| | 8 SHARED DISPOSITIVE POWER |
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SCHEDULE 13G

Item 1.**(a) Name of Issuer**

LIBERTY MEDIA CORPORATION

(b) Address of Issuer's Principal Executive Offices

12300 Liberty Boulevard, Englewood, CO 80112

Item 2(a). Name of Person Filing:**Item 2(b). Address of Principal Business Office:****Item 2(c). Citizenship:**

Warren E. Buffett
3555 Farnam Street
Omaha, Nebraska 68131
United States Citizen

National Indemnity Company
3024 Harney Street
Omaha, Nebraska 68131
Nebraska corporation

Government Employees Insurance Company
One GEICO Plaza
Washington, DC 20076
Maryland corporation

GEICO Indemnity Company
One GEICO Plaza
Washington, DC 20076
Maryland corporation

FlightSafety International Inc. Retirement Income Plan
c/o FlightSafety International Inc.
LaGuardia Airport
Flushing, NY 11371
New York

GEICO Corporation Pension Plan Trust
c/o GEICO Corporation
1 Geico Plaza
Washington, DC 20076
Maryland

Berkshire Hathaway Inc.
3555 Farnam Street
Omaha, Nebraska 68131
Delaware corporation

GEICO Corporation
One GEICO Plaza
Washington, DC 20076
Delaware corporation

National Fire & Marine Insurance Company
1314 Douglas Street
Omaha, NE 68102
Nebraska corporation

Fruit of the Loom Pension Trust
c/o Fruit of the Loom
1 Fruit of the Loom Drive
Bowling Green, KY 42102
Delaware

Lubrizol Corp. Master Trust Pension
c/o The Lubrizol Corporation
29400 Lakeland Boulevard
Wickliffe, OH 44092
Ohio

Johns Manville Corporation Master Pension
Trust
c/o Johns Manville Corporation
717 17th Street
Denver, CO 80202
Colorado

BNSF Master Retirement Trust
c/o BNSF Railway Company
2650 Lou Menk Drive
Fort Worth, TX 76131
Texas

Benjamin Moore & Co. Revised Retirement Income
Plan
c/o Benjamin Moore & Co.
101 Paragon Drive
Montvale, NJ 07645
New Jersey

Buffalo News Editorial Pension Plan
c/o The Buffalo News
One News Plaza
Buffalo, NY 14203
New York

Buffalo News Office Pension Plan
c/o The Buffalo News
One News Plaza
Buffalo, NY 14203
New York

R. Ted Weschler
404 East Main Street
Charlottesville, VA 22902
United States Citizen

General Re Corp. Employee Retirement Trust
c/o General Re Corporation
120 Long Ridge Road
Stamford, CT 06902
Connecticut

Dexter Pension Plan
c/o BH Shoe Group
124 West Putnam Ave.
Greenwich, CT 06830
Connecticut

Justin Brands Inc. Pension Plan
c/o BH Shoe Group
124 West Putnam Ave.
Greenwich, CT 06830
Connecticut

(d) **Title of Class of Securities**
Class A Common Stock

(e) **CUSIP Number**
531229607

Item 3. If this statement is filed with the SEC, it is a "6v I"

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SCHEDULE 13G

EXHIBIT B

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| Dated: February 14, 2017 | FlightSafety International Inc. Retirement Income Plan /S/ Bruce Whitman By: Bruce Whitman Title: President and Chief Executive Officer, FlightSafety International, Inc. |
| Dated: February 14, 2017 | National Fire & Marine Insurance Company /S/ Marc D. Hamburg By: Marc D. Hamburg Title: Chairman of the Board |
| Dated: February 14, 2017 | GEICO Indemnity Company /S/ William E. Roberts By: William E. Roberts Title: President |
| Dated: February 14, 2017 | Fruit of the Loom Pension Trust /S/ Melissa Burgess-Taylor By: Melissa Burgess-Taylor Title: President and Chief Executive Officer, Fruit of the Loom |
| Dated: February 14, 2017 | GEICO Corporation Pension Plan Trust /S/ William E. Roberts By: William E. Roberts Title: President, GEICO Corporation |
| Dated: February 14, 2017 | Johns Manville Corporation Master Pension Plan /S/ Mary Rhinehart By: Mary Rhinehart Title: President and Chief Executive Officer Johns Manville Corporation |

Dated: February 14, 2017

BNSF Master Retirement Trust

/S/ Julie Piggott

By: Julie Piggott

Title: Vice President, Burlington Northern & Pacific

Dated: February 14, 2017

Buffalo News News Pension Plan

/S/ Warren Colville

By: Warren Colville

Title: President, The Buffalo News

Dated: February 14, 2017

Dexter Pension Plan

/S/ James Issler

By: James Issler

Title: President, BH Shoe Group

Dated: February 14, 2017

Justin Brands Inc. Pension Plan

/S/ James Issler

By: James Issler

Title: President, BH Shoe Group

Dated: February 14, 2017

/s/ R. Ted Weschler

R. Ted Weschler